

**Table 4.1 Personal Health Care Expenditures for Medicare Beneficiaries, by Source of Payment and Type of Medical Service, 1995 (1 of 3)**

All Medicare Beneficiaries

Medical Service	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
<b>Total Medical Services</b>						
All beneficiaries	\$333,013	54.98	12.40	9.39	18.69	4.53
	7,622	0.86	0.55	0.24	0.43	0.39
Beneficiaries 65 years and older	284,177	57.06	11.15	9.56	19.50	2.72
	7,048	0.80	0.51	0.22	0.53	0.22
Beneficiaries 64 years and younger	48,836	42.90	19.66	8.41	13.96	15.07
	2,712	2.28	1.88	1.04	0.78	2.01
<b>Inpatient Hospital Services</b>						
All beneficiaries	98,871	88.97	1.17	5.93	2.36	1.58
	3,929	0.64	0.08	0.41	0.20	0.28
Beneficiaries 65 years and older	86,619	89.83	0.97	5.61	2.11	1.47
	3,952	0.62	0.09	0.39	0.22	0.29
Beneficiaries 64 years and younger	12,252	82.88	2.54	8.14	4.10	2.35
	1,085	1.96	0.28	1.71	0.49	0.56
<b>Outpatient Hospital Services</b>						
All beneficiaries	27,972	62.72	3.48	20.89	9.30	3.61
	933	0.92	0.21	0.70	0.51	0.79
Beneficiaries 65 years and older	22,632	62.56	2.52	22.71	8.75	3.46
	793	0.97	0.22	0.70	0.50	0.93
Beneficiaries 64 years and younger	5,340	63.40	7.56	13.17	11.62	4.24
	440	2.55	0.59	2.36	1.39	1.23
<b>Physician/Supplier Services</b>						
All beneficiaries	77,135	65.12	2.35	13.50	17.90	1.13
	1,613	0.50	0.14	0.35	0.49	0.12
Beneficiaries 65 years and older	67,581	66.62	1.68	13.60	17.28	0.82
	1,584	0.52	0.11	0.27	0.54	0.09
Beneficiaries 64 years and younger	9,555	54.50	7.04	12.84	22.28	3.33
	593	2.13	0.76	2.03	1.43	0.69

**Table 4.1 Personal Health Care Expenditures for Medicare Beneficiaries, by Source of Payment and Type of Medical Service, 1995 (2 of 3)**

All Medicare Beneficiaries

Medical Service	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
<b>Dental Services</b>						
All beneficiaries	\$6,530	0.79	0.72	15.28	81.74	1.47
	279	0.05	0.12	1.08	1.12	0.32
Beneficiaries 65 years and older	5,863	0.84	0.41	15.17	82.49	1.09
	246	0.05	0.10	1.21	1.24	0.26
Beneficiaries 64 years and younger	667	0.36	3.46	16.25	75.17	4.77
	146	0.11	1.17	1.83	3.64	2.37
<b>Prescription Medicines</b>						
All beneficiaries	21,599	2.85	10.95	29.47	49.33	7.39
	419	0.11	0.72	0.79	0.91	0.43
Beneficiaries 65 years and older	18,102	3.24	8.33	30.08	51.49	6.86
	366	0.13	0.74	0.81	1.00	0.53
Beneficiaries 64 years and younger	3,497	0.84	24.55	26.35	38.12	10.14
	171	0.14	2.18	2.79	1.78	0.94
<b>Medicare Hospice Services</b>						
All beneficiaries	1,472	100.00	0.00	0.00	0.00	0.00
	255	0.00	0.00	0.00	0.00	0.00
Beneficiaries 65 years and older	1,366	100.00	0.00	0.00	0.00	0.00
	251	0.00	0.00	0.00	0.00	0.00
Beneficiaries 64 years and younger	106	100.00	0.00	0.00	0.00	0.00
	53	0.00	0.00	0.00	0.00	0.00
<b>Medicare Home Health Services</b>						
All beneficiaries	17,604	92.68	0.37	0.54	5.87	0.54
	1,078	2.35	0.16	0.16	2.37	0.25
Beneficiaries 65 years and older	15,947	92.84	0.35	0.31	6.19	0.31
	1,011	2.60	0.17	0.13	2.60	0.13
Beneficiaries 64 years and younger	1,657	91.20	0.64	2.71	2.73	2.72
	247	3.28	0.40	1.50	1.47	2.14

**Table 4.1 Personal Health Care Expenditures for Medicare Beneficiaries, by Source of Payment and Type of Medical Service, 1995 (3 of 3)**

All Medicare Beneficiaries

Medical Service	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Long-Term Facility Care <sup>1</sup>						
All beneficiaries	\$81,829	10.89	42.61	2.09	32.36	12.05
	3,776	0.75	1.34	0.26	1.23	1.28
Beneficiaries 65 years and older	66,067	12.65	41.70	2.43	37.53	5.70
	2,644	0.77	1.46	0.27	1.26	0.61
Beneficiaries 64 years and younger	15,762	3.52	46.44	0.66	10.70	38.68
	1,889	0.99	4.12	0.48	1.22	4.59

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 Expenditures for long-term care in facilities include facility room and board expenses for beneficiaries who resided in a facility for the full year; facility room and board expenses for beneficiaries who resided in a facility for part of the year and in the community for part of the year; and expenditures for short-term facility stays (institutional events), primarily in skilled nursing facilities, for full-year or part-year community residents, which were reported during a community interview or created through Medicare claims. See Appendix B for additional information.

**Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$81,969	88.21	0.99	6.64	2.34	1.81	\$2,279
	3,419	0.73	0.08	0.50	0.23	0.32	94
<b>Medicare Status<sup>3</sup></b>							
<b>Aged</b>							
65 - 74 years	35,466	88.84	0.69	6.81	2.05	1.61	1,911
	2,355	1.13	0.13	0.87	0.30	0.53	127
75 - 84 years	27,932	88.94	0.76	5.85	2.22	2.23	2,675
	1,913	1.04	0.15	0.57	0.49	0.56	181
85 years and older	7,993	91.30	1.12	5.10	2.04	0.44	2,822
	555	0.60	0.16	0.37	0.37	0.22	185
<b>Disabled</b>							
Under 45 years	3,281	78.77	4.27	10.27	3.76	2.93	2,356
	492	4.79	0.51	4.52	0.79	1.11	338
45 - 64 years	7,297	83.29	1.78	8.90	3.81	2.22	2,656
	950	2.44	0.29	1.98	0.69	0.68	342
<b>Gender</b>							
Male	39,271	85.88	0.62	6.92	3.22	3.36	2,467
	2,224	1.36	0.08	0.78	0.43	0.69	138
Female	42,698	90.36	1.34	6.38	1.52	0.39	2,130
	2,506	0.64	0.16	0.59	0.16	0.12	126
<b>Living Arrangement</b>							
Alone	27,520	90.31	1.20	4.76	2.47	1.26	2,534
	2,285	1.04	0.17	0.57	0.38	0.31	204
With spouse	37,647	87.65	0.44	8.51	1.87	1.53	1,960
	1,671	0.98	0.07	0.85	0.19	0.47	87
With children	8,902	89.24	2.37	4.84	2.43	1.13	2,706
	802	1.61	0.51	1.42	0.67	0.51	230
With others	7,892	82.45	1.35	6.31	3.99	5.89	3,018
	923	3.66	0.24	1.80	1.51	2.19	337

**Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$81,969	88.21	0.99	6.64	2.34	1.81	\$2,279
	3,419	0.73	0.08	0.50	0.23	0.32	94
<b>Race/Ethnicity</b>							
White non-Hispanic	65,629	88.15	0.62	7.11	2.36	1.77	2,211
	2,705	0.78	0.08	0.51	0.28	0.36	91
Black non-Hispanic	10,282	90.62	2.40	3.70	2.27	1.01	3,115
	1,576	1.62	0.49	1.21	0.45	0.28	472
Hispanic	4,634	84.42	2.76	7.53	2.45	2.85	2,139
	718	3.38	0.34	3.06	0.57	1.21	212
Other	1,386	86.26	2.48	3.18	1.36	6.71	1,860
	314	6.56	0.60	1.71	0.68	6.76	378
<b>Income</b>							
Less than \$2,500	1,779	85.76	1.26	4.70	4.98	3.30	2,350
	490	6.06	0.61	2.76	2.28	2.34	634
\$2,500 - \$4,999	2,195	90.77	3.87	2.23	2.48	0.66	2,760
	713	1.75	1.63	0.74	1.31	0.58	826
\$5,000 - \$7,499	11,408	88.98	3.84	2.66	1.79	2.73	2,585
	1,181	1.16	0.27	0.55	0.31	1.07	255
\$7,500 - \$9,999	11,254	88.96	1.45	5.18	2.72	1.69	2,604
	1,081	1.46	0.22	1.15	0.45	0.55	255
\$10,000 - \$14,999	16,691	89.48	0.40	5.41	2.55	2.16	2,689
	2,069	1.52	0.11	0.76	0.55	0.54	321
\$15,000 - \$19,999	10,126	87.32	0.19	8.93	1.42	2.13	2,204
	1,145	2.30	0.07	1.75	0.36	1.30	222
\$20,000 - \$24,999	8,870	88.05	0.14	8.24	2.78	0.79	2,070
	982	1.64	0.08	1.40	0.73	0.41	203
\$25,000 - \$29,999	4,279	90.48	0.00	6.31	2.73	0.48	1,836
	675	1.57	0.00	1.20	0.80	0.26	284
\$30,000 or more	15,369	85.69	0.05	10.52	2.14	1.60	1,859
	1,413	2.25	0.03	1.62	0.75	1.02	171

**Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$81,969 <i>3,419</i>	88.21 <i>0.73</i>	0.99 <i>0.08</i>	6.64 <i>0.50</i>	2.34 <i>0.23</i>	1.81 <i>0.32</i>	\$2,279 <i>94</i>
<b>Health Status</b>							
Excellent	6,967 <i>1,003</i>	89.83 <i>2.62</i>	0.55 <i>0.15</i>	6.87 <i>2.15</i>	1.88 <i>0.63</i>	0.88 <i>0.56</i>	1,160 <i>167</i>
Very good	11,200 <i>957</i>	89.97 <i>1.32</i>	0.48 <i>0.09</i>	6.38 <i>0.81</i>	1.58 <i>0.31</i>	1.59 <i>0.93</i>	1,170 <i>94</i>
Good	21,695 <i>1,323</i>	85.88 <i>1.59</i>	0.80 <i>0.10</i>	7.30 <i>0.95</i>	2.98 <i>0.67</i>	3.03 <i>0.85</i>	2,058 <i>117</i>
Fair	21,816 <i>1,621</i>	86.87 <i>1.34</i>	1.13 <i>0.12</i>	7.55 <i>0.88</i>	2.46 <i>0.31</i>	1.99 <i>0.68</i>	3,271 <i>232</i>
Poor	19,732 <i>2,386</i>	90.85 <i>1.20</i>	1.52 <i>0.32</i>	4.71 <i>0.90</i>	2.13 <i>0.30</i>	0.79 <i>0.25</i>	6,293 <i>690</i>
<b>Functional Limitation</b>							
None	28,311 <i>1,775</i>	87.36 <i>1.30</i>	0.65 <i>0.09</i>	7.24 <i>0.82</i>	2.83 <i>0.49</i>	1.92 <i>0.57</i>	1,357 <i>82</i>
IADL only <sup>4</sup>	23,144 <i>1,873</i>	87.90 <i>1.39</i>	1.00 <i>0.13</i>	6.81 <i>0.93</i>	2.08 <i>0.36</i>	2.20 <i>0.71</i>	2,959 <i>234</i>
One to two ADLs <sup>5</sup>	15,202 <i>1,352</i>	89.65 <i>1.20</i>	1.37 <i>0.34</i>	5.27 <i>0.62</i>	1.96 <i>0.37</i>	1.74 <i>0.89</i>	3,267 <i>285</i>
Three to five ADLs	15,196 <i>1,504</i>	89.25 <i>1.42</i>	1.25 <i>0.27</i>	6.24 <i>1.19</i>	2.15 <i>0.38</i>	1.12 <i>0.35</i>	5,800 <i>524</i>

**Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$81,969	88.21	0.99	6.64	2.34	1.81	\$2,279
	<i>3,419</i>	<i>0.73</i>	<i>0.08</i>	<i>0.50</i>	<i>0.23</i>	<i>0.32</i>	<i>94</i>
<b>Metropolitan Area Resident</b>							
Yes	64,144	88.53	0.94	6.25	2.23	2.06	2,420
	<i>3,084</i>	<i>0.80</i>	<i>0.10</i>	<i>0.53</i>	<i>0.27</i>	<i>0.40</i>	<i>112</i>
No	17,810	87.13	1.21	8.00	2.72	0.94	1,889
	<i>1,614</i>	<i>1.53</i>	<i>0.13</i>	<i>1.25</i>	<i>0.34</i>	<i>0.31</i>	<i>174</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$23,833	60.22	2.95	23.29	9.43	4.10	\$663
	841	1.03	0.22	0.77	0.56	0.93	23
<b>Medicare Status<sup>3</sup></b>							
<b>Aged</b>							
65 - 74 years	11,199	58.19	1.64	25.77	9.39	5.01	603
	575	1.70	0.26	1.22	0.75	1.79	31
75 - 84 years	6,833	62.89	2.08	24.50	7.82	2.71	654
	432	1.07	0.37	0.88	0.69	0.96	41
85 years and older	1,255	62.27	2.39	23.99	9.53	1.83	443
	82	1.18	0.42	1.12	1.20	0.90	27
<b>Disabled</b>							
Under 45 years	1,473	64.50	10.58	8.82	14.04	2.06	1,058
	226	3.84	1.22	2.05	3.38	0.42	154
45 - 64 years	3,074	58.81	6.25	18.22	10.93	5.80	1,119
	356	4.20	0.82	3.81	1.51	2.22	128
<b>Gender</b>							
Male	12,256	56.59	2.37	24.17	10.19	6.68	770
	613	1.96	0.28	1.38	0.90	1.65	38
Female	11,577	64.06	3.56	22.36	8.64	1.38	577
	507	1.00	0.36	0.74	0.87	0.53	25
<b>Living Arrangement</b>							
Alone	6,375	60.81	4.16	19.32	9.66	6.05	587
	407	2.76	0.48	1.24	1.09	2.77	36
With spouse	12,572	58.70	1.34	27.94	8.46	3.56	655
	537	1.17	0.24	1.02	0.73	0.88	26
With children	2,472	68.27	5.17	15.20	9.66	1.69	752
	285	2.29	0.81	1.89	1.74	0.65	87
With others	2,415	58.34	5.87	17.87	13.69	4.23	924
	375	4.82	1.05	4.55	3.53	1.51	142



**Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$23,833	60.22	2.95	23.29	9.43	4.10	\$663
	841	1.03	0.22	0.77	0.56	0.93	23
<b>Race/Ethnicity</b>							
White non-Hispanic	18,095	57.15	1.65	27.00	9.78	4.42	610
	700	1.30	0.19	0.93	0.74	1.13	23
Black non-Hispanic	3,250	72.31	6.18	11.30	7.53	2.68	985
	350	1.34	0.81	1.32	1.14	0.88	113
Hispanic	1,702	64.51	8.33	10.76	11.82	4.58	786
	313	4.43	1.47	2.03	3.96	3.02	106
Other	750	72.47	8.07	14.24	4.07	1.15	1,007
	221	5.14	1.58	5.05	1.44	0.72	282
<b>Income</b>							
Less than \$2,500	388	67.02	6.78	11.11	13.07	2.02	512
	67	1.73	1.90	2.44	3.40	1.26	82
\$2,500 - \$4,999	391	64.49	8.29	13.05	9.75	4.43	492
	92	4.01	2.09	3.64	3.03	3.05	101
\$5,000 - \$7,499	3,082	70.80	11.82	7.86	7.68	1.84	699
	277	1.55	0.87	1.15	1.21	0.59	60
\$7,500 - \$9,999	2,875	63.71	5.53	13.00	13.77	3.99	665
	277	2.78	0.77	1.57	2.82	1.21	66
\$10,000 - \$14,999	4,650	59.54	1.95	20.98	9.38	8.14	749
	499	3.82	0.55	1.78	1.32	3.82	79
\$15,000 - \$19,999	2,952	57.34	0.82	29.23	8.22	4.39	643
	307	3.74	0.38	3.08	1.10	1.57	62
\$20,000 - \$24,999	2,429	58.91	0.15	27.67	10.81	2.46	567
	210	1.57	0.12	1.41	1.70	0.69	46
\$25,000 - \$29,999	1,458	56.18	0.02	32.58	8.00	3.23	626
	167	4.10	0.01	3.99	1.51	1.71	68
\$30,000 or more	5,608	55.56	0.04	33.09	8.36	2.95	678
	441	1.77	0.03	1.54	1.34	1.37	50

**Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$23,833	60.22	2.95	23.29	9.43	4.10	\$663
	841	1.03	0.22	0.77	0.56	0.93	23
<b>Health Status</b>							
Excellent	2,185	58.15	1.31	29.81	7.67	3.06	364
	200	2.14	0.36	2.65	1.02	1.14	31
Very good	4,003	59.93	1.08	25.80	11.30	1.89	418
	217	1.32	0.18	1.16	1.60	0.46	20
Good	6,823	57.10	2.28	24.51	8.78	7.34	647
	474	2.76	0.36	1.96	1.06	2.81	42
Fair	6,207	60.20	4.36	21.74	9.75	3.95	931
	451	2.05	0.48	1.87	1.24	0.81	65
Poor	4,559	66.13	4.46	18.23	9.22	1.96	1,454
	502	1.72	0.69	1.29	1.40	1.14	140
<b>Functional Limitation</b>							
None	10,408	59.23	2.06	26.88	8.46	3.36	499
	498	1.24	0.25	1.11	0.81	0.65	23
IADL only <sup>4</sup>	6,798	63.69	3.95	19.74	9.07	3.55	869
	503	1.65	0.49	0.95	1.20	1.19	63
One to two ADLs <sup>5</sup>	3,817	60.33	3.84	21.29	11.00	3.53	820
	317	1.97	0.63	1.62	1.41	1.47	67
Three to five ADLs	2,775	55.18	2.63	21.28	11.85	9.06	1,059
	408	6.59	0.67	4.08	2.09	6.02	140

**Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$23,833	60.22	2.95	23.29	9.43	4.10	\$663
	<i>841</i>	<i>1.03</i>	<i>0.22</i>	<i>0.77</i>	<i>0.56</i>	<i>0.93</i>	<i>23</i>
<b>Metropolitan Area Resident</b>							
Yes	18,089	59.89	3.02	23.51	9.32	4.26	683
	<i>796</i>	<i>1.28</i>	<i>0.27</i>	<i>0.97</i>	<i>0.71</i>	<i>1.14</i>	<i>30</i>
No	5,739	61.32	2.73	22.55	9.79	3.61	609
	<i>321</i>	<i>1.40</i>	<i>0.35</i>	<i>0.86</i>	<i>0.51</i>	<i>1.39</i>	<i>31</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$68,185	63.71	2.18	14.72	18.22	1.17	\$1,896
	1,514	0.56	0.16	0.38	0.55	0.13	42
<b>Medicare Status<sup>3</sup></b>							
<b>Aged</b>							
65 - 74 years	31,053	64.58	1.12	15.55	17.70	1.05	1,673
	996	0.89	0.11	0.41	1.01	0.17	50
75 - 84 years	22,128	66.26	1.41	14.35	17.31	0.67	2,119
	825	0.93	0.18	0.48	0.88	0.11	71
85 years and older	6,379	66.79	3.24	12.74	16.86	0.37	2,252
	462	1.16	0.81	0.61	1.21	0.11	150
<b>Disabled</b>							
Under 45 years	2,794	50.68	11.78	10.32	23.28	3.94	2,007
	320	4.22	1.94	3.80	3.36	1.42	219
45 - 64 years	5,831	52.22	4.95	16.02	23.52	3.28	2,123
	471	2.81	0.67	2.59	1.67	0.93	163
<b>Gender</b>							
Male	30,284	64.21	1.65	14.94	17.63	1.58	1,902
	790	0.70	0.19	0.47	0.65	0.22	48
Female	37,901	63.30	2.60	14.55	18.70	0.85	1,890
	1,153	0.82	0.24	0.53	0.82	0.16	58
<b>Living Arrangement</b>							
Alone	20,886	65.21	2.78	13.36	17.38	1.27	1,923
	846	1.05	0.24	0.53	1.09	0.29	73
With spouse	34,492	62.95	0.73	16.82	18.43	1.06	1,796
	977	0.78	0.11	0.54	0.81	0.14	46
With children	7,324	65.80	4.39	10.92	17.92	0.97	2,227
	552	1.73	0.62	0.88	1.92	0.25	155
With others	5,483	59.93	6.00	11.76	20.53	1.78	2,097
	457	3.09	1.06	1.99	2.09	0.74	155

**Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$68,185	63.71	2.18	14.72	18.22	1.17	\$1,896
	1,514	0.56	0.16	0.38	0.55	0.13	42
<b>Race/Ethnicity</b>							
White non-Hispanic	55,698	63.21	1.36	16.11	18.19	1.13	1,877
	1,539	0.67	0.14	0.39	0.59	0.14	49
Black non-Hispanic	6,729	65.05	6.44	7.27	20.06	1.19	2,039
	526	2.52	0.98	0.75	3.19	0.29	165
Hispanic	4,312	68.29	4.84	8.50	17.59	0.78	1,990
	728	2.67	0.55	1.21	2.67	0.15	172
Other	1,368	63.18	6.26	14.15	12.23	4.19	1,836
	225	8.09	2.01	6.26	2.47	2.67	279
<b>Income</b>							
Less than \$2,500	1,272	63.93	3.42	8.77	22.26	1.62	1,680
	149	2.31	1.30	1.16	3.48	0.56	171
\$2,500 - \$4,999	1,340	69.26	9.12	7.16	13.06	1.41	1,685
	272	2.82	2.65	1.47	1.84	0.74	271
\$5,000 - \$7,499	7,923	68.63	9.85	5.71	14.95	0.86	1,796
	532	1.29	0.64	0.63	1.32	0.22	101
\$7,500 - \$9,999	8,813	65.57	3.93	10.07	18.73	1.70	2,039
	594	1.38	0.51	0.83	1.57	0.54	138
\$10,000 - \$14,999	12,485	64.40	0.72	15.83	17.27	1.78	2,011
	787	1.40	0.10	1.00	1.07	0.47	114
\$15,000 - \$19,999	8,823	63.28	0.59	15.20	19.60	1.32	1,921
	588	2.21	0.35	0.77	2.60	0.31	108
\$20,000 - \$24,999	7,563	62.35	0.06	16.36	20.54	0.69	1,765
	537	2.32	0.03	0.71	2.30	0.22	104
\$25,000 - \$29,999	4,350	63.96	0.06	18.86	16.13	1.01	1,867
	356	1.84	0.03	1.61	1.23	0.39	129
\$30,000 or more	15,616	59.93	0.27	19.94	19.17	0.68	1,889
	716	1.39	0.19	0.94	0.88	0.16	73

**Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$68,185 <i>1,514</i>	63.71 <i>0.56</i>	2.18 <i>0.16</i>	14.72 <i>0.38</i>	18.22 <i>0.55</i>	1.17 <i>0.13</i>	\$1,896 <i>42</i>
<b>Health Status</b>							
Excellent	7,254 <i>362</i>	63.09 <i>1.46</i>	0.80 <i>0.13</i>	15.40 <i>1.07</i>	19.80 <i>1.21</i>	0.92 <i>0.32</i>	1,208 <i>52</i>
Very good	13,003 <i>601</i>	63.83 <i>1.01</i>	1.13 <i>0.17</i>	16.40 <i>0.61</i>	17.65 <i>0.96</i>	0.99 <i>0.20</i>	1,359 <i>60</i>
Good	19,364 <i>786</i>	66.43 <i>0.75</i>	1.61 <i>0.18</i>	14.68 <i>0.57</i>	16.39 <i>0.69</i>	0.89 <i>0.20</i>	1,837 <i>58</i>
Fair	16,855 <i>895</i>	64.39 <i>1.26</i>	2.82 <i>0.27</i>	14.14 <i>0.57</i>	17.33 <i>1.19</i>	1.32 <i>0.21</i>	2,527 <i>125</i>
Poor	11,547 <i>753</i>	58.45 <i>2.17</i>	4.13 <i>0.64</i>	13.24 <i>1.57</i>	22.37 <i>2.37</i>	1.81 <i>0.49</i>	3,683 <i>191</i>
<b>Functional Limitation</b>							
None	29,581 <i>916</i>	64.99 <i>0.69</i>	1.12 <i>0.12</i>	15.33 <i>0.44</i>	17.56 <i>0.66</i>	1.00 <i>0.19</i>	1,418 <i>41</i>
IADL only <sup>4</sup>	16,885 <i>797</i>	65.32 <i>1.21</i>	2.46 <i>0.26</i>	14.86 <i>0.78</i>	15.89 <i>1.04</i>	1.47 <i>0.32</i>	2,159 <i>95</i>
One to two ADLs <sup>5</sup>	11,857 <i>705</i>	63.59 <i>1.58</i>	2.86 <i>0.43</i>	15.86 <i>1.27</i>	16.42 <i>1.04</i>	1.28 <i>0.29</i>	2,548 <i>138</i>
Three to five ADLs	9,828 <i>654</i>	57.18 <i>1.53</i>	4.06 <i>0.67</i>	11.27 <i>1.24</i>	26.45 <i>1.88</i>	1.04 <i>0.33</i>	3,751 <i>192</i>

**Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$68,185	63.71	2.18	14.72	18.22	1.17	\$1,896
	<i>1,514</i>	<i>0.56</i>	<i>0.16</i>	<i>0.38</i>	<i>0.55</i>	<i>0.13</i>	<i>42</i>
<b>Metropolitan Area Resident</b>							
Yes	54,502	64.42	2.01	14.61	17.81	1.15	2,056
	<i>1,406</i>	<i>0.66</i>	<i>0.15</i>	<i>0.46</i>	<i>0.64</i>	<i>0.15</i>	<i>51</i>
No	13,666	60.93	2.82	15.14	19.83	1.27	1,449
	<i>622</i>	<i>1.11</i>	<i>0.49</i>	<i>0.48</i>	<i>0.92</i>	<i>0.27</i>	<i>66</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$6,507	0.75	0.71	15.31	81.77	1.45	\$181
	278	0.05	0.12	1.08	1.12	0.32	8
<b>Medicare Status<sup>3</sup></b>							
<b>Aged</b>							
65 - 74 years	3,704	0.61	0.26	17.42	80.63	1.08	200
	195	0.05	0.08	1.73	1.74	0.25	11
75 - 84 years	1,823	1.07	0.54	12.03	85.22	1.14	175
	114	0.12	0.17	1.44	1.61	0.65	11
85 years and older	313	1.46	1.40	7.46	89.08	0.60	111
	47	0.23	1.09	1.92	2.31	0.36	16
<b>Disabled</b>							
Under 45 years	168	0.62	8.59	16.43	62.45	11.91	121
	22	0.27	2.28	4.44	5.60	6.37	15
45 - 64 years	498	0.26	1.60	16.21	79.57	2.36	181
	147	0.11	0.98	1.76	3.03	1.52	53
<b>Gender</b>							
Male	2,692	0.89	0.45	17.48	79.01	2.18	169
	164	0.09	0.13	2.26	2.34	0.54	10
Female	3,814	0.66	0.90	13.78	83.72	0.94	190
	214	0.06	0.19	1.08	1.14	0.37	11
<b>Living Arrangement</b>							
Alone	1,760	0.78	1.07	11.85	85.28	1.02	162
	150	0.09	0.26	1.53	1.53	0.35	13
With spouse	3,870	0.70	0.21	17.95	79.43	1.70	202
	187	0.06	0.09	1.69	1.74	0.46	9
With children	475	1.19	2.44	9.83	86.01	0.53	144
	122	0.35	1.13	2.28	2.43	0.47	37
With others	403	0.62	1.94	11.53	83.91	2.00	154
	104	0.20	0.91	2.00	2.50	1.15	39



**Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$6,507	0.75	0.71	15.31	81.77	1.45	\$181
	278	0.05	0.12	1.08	1.12	0.32	8
<b>Race/Ethnicity</b>							
White non-Hispanic	5,863	0.66	0.43	15.53	82.01	1.37	198
	270	0.05	0.10	1.15	1.19	0.30	9
Black non-Hispanic	248	1.78	3.58	21.27	70.46	2.90	75
	40	0.49	1.24	5.16	4.96	1.39	12
Hispanic	247	1.71	3.57	7.46	86.07	1.19	114
	37	0.29	1.45	1.94	2.66	0.78	17
Other	145	0.95	2.31	10.20	83.79	2.76	194
	38	0.34	1.03	3.73	4.82	3.33	47
<b>Income</b>							
Less than \$2,500	43	3.67	2.81	11.07	82.00	0.45	57
	8	1.22	1.95	4.32	4.99	0.36	10
\$2,500 - \$4,999	59	1.02	2.74	5.94	89.36	0.94	74
	16	0.45	1.46	3.97	5.91	3.00	19
\$5,000 - \$7,499	469	0.83	5.22	4.03	88.48	1.45	106
	136	0.32	2.24	2.32	2.90	1.29	31
\$7,500 - \$9,999	377	1.44	3.42	5.37	88.08	1.69	87
	48	0.24	1.18	1.53	2.09	0.68	11
\$10,000 - \$14,999	791	1.07	0.67	11.19	85.65	1.42	127
	85	0.14	0.39	2.31	2.38	0.55	13
\$15,000 - \$19,999	673	0.86	0.01	13.62	84.63	0.88	147
	72	0.13	0.01	2.33	2.42	0.61	15
\$20,000 - \$24,999	917	0.90	0.07	18.63	77.57	2.83	214
	112	0.24	0.06	2.63	3.01	1.43	25
\$25,000 - \$29,999	442	0.89	0.00	18.73	79.71	0.68	190
	58	0.16	0.00	3.23	3.30	0.36	23
\$30,000 or more	2,735	0.41	0.01	18.83	79.50	1.26	331
	163	0.04	0.00	2.10	2.14	0.40	18

**Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$6,507	0.75	0.71	15.31	81.77	1.45	\$181
	278	0.05	0.12	1.08	1.12	0.32	8
<b>Health Status</b>							
Excellent	1,334	0.80	0.31	15.42	82.48	0.99	222
	137	0.15	0.19	2.06	2.10	0.31	22
Very good	2,001	0.64	0.47	17.36	80.03	1.50	209
	152	0.07	0.22	2.97	3.01	0.71	16
Good	1,870	0.85	0.48	14.61	82.85	1.22	177
	129	0.07	0.14	1.79	1.84	0.33	12
Fair	943	0.77	1.27	15.08	81.50	1.38	141
	155	0.18	0.36	1.80	2.04	0.60	23
Poor	358	0.70	3.26	7.72	83.96	4.36	114
	59	0.15	1.31	2.40	3.85	3.43	18
<b>Functional Limitation</b>							
None	4,260	0.73	0.38	16.37	81.01	1.50	204
	205	0.06	0.11	1.63	1.66	0.40	10
IADL only <sup>4</sup>	1,119	0.90	1.50	14.10	81.72	1.78	143
	97	0.11	0.45	1.65	1.64	0.55	12
One to two ADLs <sup>5</sup>	599	0.90	1.14	14.68	82.28	1.01	129
	65	0.20	0.39	2.68	2.70	0.74	14
Three to five ADLs	528	0.47	1.20	10.05	87.43	0.85	201
	148	0.17	0.71	1.36	1.51	0.66	56

**Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$6,507	0.75	0.71	15.31	81.77	1.45	\$181
	<i>278</i>	<i>0.05</i>	<i>0.12</i>	<i>1.08</i>	<i>1.12</i>	<i>0.32</i>	<i>8</i>
<b>Metropolitan Area Resident</b>							
Yes	5,407	0.88	0.54	15.66	81.58	1.34	204
	<i>251</i>	<i>0.06</i>	<i>0.10</i>	<i>1.24</i>	<i>1.26</i>	<i>0.30</i>	<i>9</i>
No	1,099	0.13	1.55	13.57	82.73	2.02	117
	<i>108</i>	<i>0.05</i>	<i>0.51</i>	<i>2.04</i>	<i>2.18</i>	<i>1.13</i>	<i>12</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$21,325	2.75	10.84	29.57	49.44	7.39	\$593
	412	0.11	0.71	0.79	0.89	0.42	11
<b>Medicare Status<sup>3</sup></b>							
<b>Aged</b>							
65 - 74 years	10,053	2.81	7.24	34.27	49.11	6.58	542
	265	0.16	0.83	1.05	1.24	0.73	13
75 - 84 years	6,210	3.67	8.65	26.20	54.01	7.48	595
	183	0.23	0.89	1.04	1.14	0.73	15
85 years and older	1,590	3.08	12.95	19.69	58.02	6.26	561
	65	0.32	1.93	1.43	2.05	1.06	18
<b>Disabled</b>							
Under 45 years	861	1.12	46.61	15.33	29.18	7.76	619
	53	0.34	2.97	2.52	1.92	1.73	34
45 - 64 years	2,612	0.72	16.86	30.21	41.34	10.87	951
	172	0.15	2.17	3.56	2.39	1.24	63
<b>Gender</b>							
Male	8,661	3.35	8.13	30.64	48.61	9.27	544
	214	0.23	0.81	1.25	1.01	0.68	13
Female	12,664	2.35	12.70	28.83	50.01	6.11	632
	304	0.13	0.94	0.99	1.12	0.51	15
<b>Living Arrangement</b>							
Alone	6,294	2.68	16.39	22.53	50.36	8.05	580
	205	0.21	1.39	1.34	1.09	0.86	15
With spouse	11,204	2.87	3.79	35.95	50.63	6.76	583
	333	0.18	0.51	1.13	1.18	0.55	16
With children	2,194	2.93	20.08	24.30	45.59	7.09	667
	143	0.35	2.37	3.48	2.17	1.08	37
With others	1,634	2.01	25.43	20.00	42.92	9.63	625
	129	0.33	3.08	3.61	2.72	1.86	42

**Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$21,325	2.75	10.84	29.57	49.44	7.39	\$593
	412	0.11	0.71	0.79	0.89	0.42	11
<b>Race/Ethnicity</b>							
White non-Hispanic	17,903	2.55	7.30	31.91	51.19	7.05	603
	401	0.11	0.57	0.94	0.92	0.49	11
Black non-Hispanic	1,789	2.79	29.20	18.61	40.45	8.94	542
	95	0.40	3.04	2.44	2.13	1.48	26
Hispanic	1,265	4.87	32.04	15.17	39.83	8.09	584
	252	0.82	4.61	3.88	3.44	1.40	66
Other	323	5.35	22.44	16.18	41.43	14.60	433
	40	1.35	4.51	3.90	3.56	5.09	45
<b>Income</b>							
Less than \$2,500	433	2.94	13.17	13.99	59.51	10.39	572
	56	0.75	2.41	3.14	4.80	3.23	63
\$2,500 - \$4,999	428	2.10	31.98	9.67	46.10	10.16	539
	50	0.64	5.04	2.82	4.49	2.67	53
\$5,000 - \$7,499	2,569	1.79	49.37	8.12	33.55	7.17	582
	167	0.35	2.63	2.85	1.74	1.11	32
\$7,500 - \$9,999	2,508	3.45	24.08	11.17	52.30	8.99	580
	129	0.46	2.39	1.35	1.99	1.15	28
\$10,000 - \$14,999	3,563	2.97	4.05	24.79	56.85	11.33	574
	166	0.23	0.65	1.67	1.78	1.46	21
\$15,000 - \$19,999	2,868	2.53	1.42	34.38	53.03	8.63	624
	179	0.28	0.66	2.51	2.36	1.26	32
\$20,000 - \$24,999	2,695	2.86	0.56	44.10	47.02	5.47	629
	165	0.41	0.25	1.84	1.69	0.97	32
\$25,000 - \$29,999	1,375	3.30	0.31	41.95	51.00	3.45	590
	103	0.42	0.19	3.43	3.17	0.81	40
\$30,000 or more	4,886	2.71	0.85	42.56	49.12	4.75	591
	212	0.23	0.57	1.58	1.66	0.64	22

**Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$21,325	2.75	10.84	29.57	49.44	7.39	\$593
	412	0.11	0.71	0.79	0.89	0.42	11
<b>Health Status</b>							
Excellent	1,926	6.37	4.79	32.48	50.74	5.62	321
	90	0.67	1.14	1.87	1.67	0.90	14
Very good	4,394	3.53	5.69	33.70	51.48	5.60	459
	183	0.27	0.87	1.76	1.59	0.82	15
Good	6,306	3.17	8.51	31.41	49.72	7.20	598
	236	0.21	0.92	1.31	1.33	0.83	18
Fair	5,570	1.22	15.56	26.51	47.75	8.95	835
	232	0.15	1.29	2.03	1.71	1.02	27
Poor	3,085	1.36	17.92	23.61	48.42	8.69	984
	174	0.29	2.32	1.96	2.21	1.00	40
<b>Functional Limitation</b>							
None	9,383	3.82	7.19	32.30	50.18	6.50	450
	233	0.21	0.70	0.94	0.94	0.47	10
IADL only <sup>4</sup>	5,407	2.36	13.21	28.00	49.29	7.14	691
	196	0.23	1.25	1.31	1.54	0.94	20
One to two ADLs <sup>5</sup>	3,796	1.55	14.56	26.87	48.13	8.89	816
	155	0.17	1.44	2.12	1.87	0.99	27
Three to five ADLs	2,733	1.56	13.54	27.03	48.98	8.89	1,043
	210	0.32	2.16	4.00	3.06	1.67	65

**Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$21,325	2.75	10.84	29.57	49.44	7.39	\$593
	412	0.11	0.71	0.79	0.89	0.42	11
<b>Metropolitan Area Resident</b>							
Yes	15,773	3.58	10.28	31.70	46.11	8.34	595
	383	0.16	0.82	0.94	0.99	0.53	13
No	5,550	0.41	12.44	23.53	58.92	4.70	588
	177	0.13	1.46	1.49	1.99	0.50	15

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.7 Long-Term Care Facility Expenditures for Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 3)**

Long-Term Care Facility Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$) <sup>3</sup>	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$77,664	6.99	44.86	1.76	33.70	12.68	\$27,643
	3,775	0.66	1.40	0.28	1.30	1.34	887
<b>Medicare Status<sup>4</sup></b>							
<b>Aged</b>							
65 - 74 years	8,767	9.53	51.09	2.76	26.75	9.87	24,615
	1,417	2.21	6.49	1.32	4.10	3.33	2,845
75 - 84 years	21,872	9.75	40.43	2.48	40.29	7.04	26,593
	1,518	1.37	2.59	0.56	2.61	1.04	997
85 years and older	31,523	6.71	45.05	1.54	42.43	4.28	25,070
	1,374	0.81	1.88	0.32	1.71	0.62	663
<b>Disabled</b>							
Under 45 years	7,495	0.55	45.16	1.33	7.48	45.48	46,115
	1,067	0.47	5.60	1.03	1.18	5.58	5,409
45 - 64 years	8,008	3.85	49.13	0.00	13.50	33.52	37,860
	1,194	1.20	5.35	0.00	1.89	6.12	3,387
<b>Gender</b>							
Male	26,262	5.89	45.27	1.79	26.06	21.00	29,494
	2,706	0.94	3.05	0.47	2.37	2.60	1,878
Female	51,401	7.56	44.66	1.75	37.61	8.43	26,777
	2,024	0.84	1.66	0.31	1.61	1.18	699
<b>Race/Ethnicity</b>							
White non-Hispanic	66,624	7.03	43.29	1.86	36.74	11.08	27,277
	3,520	0.72	1.54	0.31	1.47	1.39	955
Black non-Hispanic	6,385	6.67	51.61	0.03	12.38	29.31	29,715
	815	1.91	5.25	0.04	1.58	5.72	2,161
Hispanic	1,812	2.09	67.82	0.58	15.41	14.10	29,659
	404	1.11	7.80	0.59	4.23	7.09	4,417
Other	1,529	15.88	35.60	1.75	25.23	21.53	24,082
	431	5.30	9.76	1.71	11.23	11.24	4,107



**Table 4.7 Long-Term Care Facility Expenditures for Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 3)**

Long-Term Care Facility Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$) <sup>3</sup>	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$77,664	6.99	44.86	1.76	33.70	12.68	\$27,643
	3,775	0.66	1.40	0.28	1.30	1.34	887
<b>Income</b>							
Less than \$2,500	2,526	5.01	51.14	1.28	27.74	14.82	30,562
	558	2.06	6.79	0.85	6.64	4.54	4,928
\$2,500 - \$4,999	5,275	2.72	65.58	0.15	14.10	17.45	37,442
	1,105	1.05	7.17	0.13	3.39	5.75	5,962
\$5,000 - \$7,499	25,843	6.26	57.50	0.90	20.46	14.89	26,426
	1,435	1.25	2.00	0.28	1.27	2.25	936
\$7,500 - \$9,999	16,951	6.30	51.75	1.57	28.04	12.33	27,443
	1,579	1.23	3.19	0.56	2.12	2.40	1,619
\$10,000 - \$14,999	11,106	8.02	31.42	2.18	43.31	15.06	26,065
	1,011	1.35	4.15	0.79	3.70	4.95	1,371
\$15,000 - \$19,999	3,857	6.06	32.89	0.85	52.90	7.31	23,867
	561	2.66	5.37	0.45	5.95	2.32	2,202
\$20,000 - \$24,999	3,392	5.35	16.29	1.68	71.83	4.85	26,561
	497	1.75	4.58	0.85	5.67	2.12	2,084
\$25,000 - \$29,999	3,346	14.97	12.95	7.23	62.15	2.71	34,824
	769	5.35	4.45	2.90	9.52	1.82	3,655
\$30,000 or more	5,368	12.48	13.31	4.75	61.88	7.57	29,922
	854	2.60	3.78	1.35	4.89	3.19	2,208
<b>Health Status</b>							
Excellent	2,941	6.15	43.69	0.58	26.18	23.40	25,243
	523	2.77	7.05	0.39	5.52	5.78	2,672
Very good	10,408	5.18	45.61	1.67	28.27	19.26	32,475
	1,634	1.25	4.19	0.64	3.97	5.02	3,394
Good	25,019	6.68	41.93	1.34	36.14	13.91	27,627
	1,741	1.24	2.02	0.52	2.45	2.17	1,163
Fair	27,954	5.96	48.19	1.83	35.33	8.70	28,407
	1,860	0.93	2.81	0.42	2.29	2.20	1,214
Poor	11,341	12.13	42.76	2.91	31.25	10.95	23,462
	978	1.60	2.94	0.72	3.02	2.35	1,021

**Table 4.7 Long-Term Care Facility Expenditures for Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 3)**

Long-Term Care Facility Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$) <sup>3</sup>	Source of Payment (as a percent of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$77,664	6.99	44.86	1.76	33.70	12.68	\$27,643
	<i>3,775</i>	<i>0.66</i>	<i>1.40</i>	<i>0.28</i>	<i>1.30</i>	<i>1.34</i>	<i>887</i>
<b>Functional Limitation</b>							
None	410	35.29	18.82	1.97	30.88	13.04	6,948
	<i>140</i>	<i>9.23</i>	<i>12.20</i>	<i>1.23</i>	<i>7.37</i>	<i>7.56</i>	<i>1,442</i>
IADL only <sup>5</sup>	5,263	5.70	33.88	1.01	18.73	40.69	23,235
	<i>755</i>	<i>1.62</i>	<i>5.18</i>	<i>0.56</i>	<i>2.91</i>	<i>5.31</i>	<i>2,095</i>
One to two ADLs <sup>6</sup>	14,128	7.80	38.50	1.22	35.18	17.30	24,089
	<i>1,223</i>	<i>1.28</i>	<i>3.70</i>	<i>0.35</i>	<i>2.81</i>	<i>3.40</i>	<i>1,552</i>
Three to five ADLs	55,289	6.97	48.34	2.05	35.31	7.33	30,028
	<i>3,043</i>	<i>0.81</i>	<i>1.72</i>	<i>0.36</i>	<i>1.68</i>	<i>1.07</i>	<i>1,133</i>
<b>Metropolitan Area Resident</b>							
Yes	61,068	7.46	42.95	1.87	33.79	13.93	29,765
	<i>3,594</i>	<i>0.79</i>	<i>1.64</i>	<i>0.32</i>	<i>1.60</i>	<i>1.66</i>	<i>1,167</i>
No	16,595	5.29	51.90	1.35	33.37	8.09	21,884
	<i>1,289</i>	<i>0.90</i>	<i>2.98</i>	<i>0.61</i>	<i>2.39</i>	<i>1.27</i>	<i>674</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *long-term care facility residents* includes beneficiaries who resided only in a long-term care facility during the year, and beneficiaries who resided part of the year in a long-term care facility and part of the year in the community. It excludes beneficiaries who resided only in the community during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Expenditures for long-term care in facilities include facility room and board expenses for beneficiaries who resided in a facility for the full year, and facility room and board expenses for beneficiaries who resided in a facility for part of the year and in the community for part of the year. However, in contrast with table 4.1, facility expenditures in table 4.7 do not include expenditures for short-term facility stays (institutional events), primarily in skilled nursing facilities, for full-year community residents, which were reported during a community interview or created through Medicare claims data. See Appendix B for additional information.
- 4 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 5 *IADL* stands for Instrumental Activity of Daily Living.
- 6 *ADL* stands for Activity of Daily Living.

**Table 4.8 Personal Health Care Expenditures per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per Beneficiary</b>	\$6,498	\$5,011	\$7,980	\$6,143	\$5,977	\$6,399
	153	359	375	273	307	565
<b>Medicare Status<sup>3</sup></b>						
<b>Aged</b>						
65 - 74 years	5,551	4,500	6,962	4,763	5,375	6,053
	192	671	666	258	424	809
75 - 84 years	7,298	5,292	8,769	7,319	6,316	6,534
	272	807	956	539	382	920
85 years and older	8,577	6,973	10,207	8,487	7,382	9,145
	412	910	1,017	781	843	1,779
<b>Disabled</b>						
Under 45 years	6,705	4,459	7,535	4,399	6,701	5,249
	610	791	856	1,666	1,514	0
45 - 64 years	7,605	5,541	8,240	8,488	8,520	6,514
	599	851	849	1,959	1,433	2,453
<b>Gender</b>						
Male	6,585	4,615	7,300	6,704	6,437	5,407
	196	326	487	362	489	754
Female	6,428	5,564	8,388	5,789	5,575	7,234
	208	716	536	371	367	889
<b>Living Arrangement</b>						
Alone	6,866	5,649	7,982	5,952	7,071	6,959
	312	954	625	471	818	1,036
With spouse	5,864	4,164	7,519	5,976	5,331	5,622
	147	382	601	304	286	732
With children	7,913	7,281	8,676	6,180	7,504	10,432
	402	1,226	854	727	1,238	2,687
With others	7,842	4,845	7,819	9,126	7,953	9,333
	551	739	880	1,419	1,646	3,361

**Table 4.8 Personal Health Care Expenditures per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per Beneficiary</b>	\$6,498	\$5,011	\$7,980	\$6,143	\$5,977	\$6,399
	153	359	375	273	307	565
<b>Race/Ethnicity</b>						
White non-Hispanic	6,343	5,117	8,398	6,165	5,596	6,552
	160	496	594	291	256	606
Black non-Hispanic	7,949	5,062	8,656	5,308	10,625	4,515
	703	861	904	1,318	2,888	1,482
Hispanic	6,637	4,836	6,227	6,567	8,338	4,888
	362	776	516	1,413	1,678	3,599
Other	6,176	2,928	7,226	6,150	5,083	3,844
	783	1,484	1,625	1,690	1,658	1,335
<b>Income</b>						
Less than \$2,500	6,282	8,126	5,004	6,441	4,152	7,658
	1,051	4,717	766	1,431	889	4,153
\$2,500 - \$4,999	6,967	5,558	6,759	4,251	13,572	12,647
	1,094	2,507	1,943	724	4,910	9,590
\$5,000 - \$7,499	6,806	5,107	7,354	5,823	6,342	4,304
	413	983	568	875	1,656	2,385
\$7,500 - \$9,999	7,128	4,700	9,465	6,347	6,182	9,467
	400	525	798	601	1,113	3,082
\$10,000 - \$14,999	7,163	4,975	7,735	7,371	7,250	6,692
	472	543	1,110	772	1,133	2,481
\$15,000 - \$19,999	6,366	3,742	13,769	5,539	6,226	7,013
	363	727	4,189	502	745	1,197
\$20,000 - \$24,999	5,975	4,881	9,983	5,207	5,652	7,804
	348	1,696	3,620	611	578	1,477
\$25,000 - \$29,999	5,813	5,711	4,738	6,810	4,890	3,871
	461	1,918	1,196	1,164	585	762
\$30,000 or more	6,016	5,627	12,956	5,860	5,583	5,707
	267	1,112	2,461	480	418	675

**Table 4.8 Personal Health Care Expenditures per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per Beneficiary</b>	\$6,498	\$5,011	\$7,980	\$6,143	\$5,977	\$6,399
	153	359	375	273	307	565
<b>Health Status</b>						
Excellent	3,894	2,758	3,767	3,523	2,967	3,492
	228	404	506	361	510	879
Very good	4,148	3,471	4,090	3,917	3,372	4,419
	146	694	538	319	199	779
Good	6,066	4,410	5,902	5,879	5,788	5,862
	202	635	512	343	361	905
Fair	8,701	4,819	8,381	9,337	9,579	12,679
	384	505	614	672	858	2,219
Poor	15,230	10,400	15,829	17,020	18,601	10,773
	969	1,691	1,525	2,552	2,779	2,758
<b>Functional Limitation</b>						
None	4,392	3,139	4,593	4,058	3,857	4,200
	123	393	362	221	288	493
IADL only <sup>4</sup>	7,524	4,507	7,674	7,505	7,836	9,410
	359	662	608	598	732	1,949
One to two ADLs <sup>5</sup>	8,796	5,564	8,815	10,219	8,224	11,387
	436	877	916	1,106	647	1,707
Three to five ADLs	16,083	14,883	17,807	14,163	18,411	12,015
	895	2,340	2,150	1,263	2,423	3,465

**Table 4.8 Personal Health Care Expenditures per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per Beneficiary</b>	\$6,498	\$5,011	\$7,980	\$6,143	\$5,977	\$6,399
	<i>153</i>	<i>359</i>	<i>375</i>	<i>273</i>	<i>307</i>	<i>565</i>
<b>Metropolitan Area Resident</b>						
Yes	6,958	5,455	8,612	6,448	6,398	7,045
	<i>179</i>	<i>493</i>	<i>464</i>	<i>357</i>	<i>377</i>	<i>709</i>
No	5,224	4,142	6,612	5,582	4,447	4,461
	<i>275</i>	<i>264</i>	<i>572</i>	<i>426</i>	<i>332</i>	<i>802</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but their expenditures are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$11,848	\$12,312	\$11,953	\$12,200	\$12,242	\$13,944
	412	835	845	739	925	2,441
<b>Medicare Status<sup>3</sup></b>						
<b>Aged</b>						
65 - 74 years	12,327	12,913	12,140	11,125	14,141	14,361
	689	1,669	1,864	786	1,811	3,646
75 - 84 years	11,849	12,323	13,479	13,620	10,284	12,728
	791	2,922	2,447	1,368	663	3,190
85 years and older	9,873	8,960	9,513	10,596	10,137	13,234
	515	1,096	975	888	1,031	4,512
<b>Disabled</b>						
Under 45 years	11,512	8,407	12,336	12,171	11,903	0
	1,298	1,194	1,731	3,382	3,479	0
45 - 64 years	12,412	14,374	10,981	16,028	11,966	66,649
	1,098	3,078	1,153	4,664	2,195	0
<b>Gender</b>						
Male	12,308	10,816	12,521	12,118	14,116	12,882
	648	816	1,034	882	1,681	2,914
Female	11,453	14,713	11,668	12,267	10,378	14,654
	547	1,702	1,152	1,046	811	3,638
<b>Living Arrangement</b>						
Alone	12,346	14,479	11,014	12,831	14,228	13,532
	882	2,322	1,344	1,695	2,555	3,174
With spouse	11,226	11,579	12,387	11,293	11,626	13,925
	432	1,385	1,515	742	994	4,223
With children	11,312	11,002	13,004	10,419	10,098	13,584
	853	1,746	2,244	953	1,771	4,698
With others	14,295	10,898	12,501	19,771	12,367	16,800
	1,241	2,388	1,446	4,299	3,385	6,999

**Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$11,848	\$12,312	\$11,953	\$12,200	\$12,242	\$13,944
	412	835	845	739	925	2,441
<b>Race/Ethnicity</b>						
White non-Hispanic	11,712	12,964	11,948	12,325	11,349	14,106
	392	1,131	1,126	795	710	2,606
Black non-Hispanic	14,624	10,524	13,892	12,894	22,271	8,611
	2,121	2,141	2,317	3,631	8,120	3,191
Hispanic	9,632	10,948	8,932	8,328	13,118	46,700
	948	1,442	1,565	1,629	4,507	0
Other	10,534	13,859	13,739	10,318	4,552	3,438
	1,364	9,029	2,247	3,297	641	0
<b>Income</b>						
Less than \$2,500	10,635	18,417	8,935	10,450	9,773	9,833
	2,157	7,455	1,810	2,340	3,646	3,424
\$2,500 - \$4,999	14,252	17,925	15,250	7,736	18,810	2,196
	4,101	8,778	7,537	1,175	8,744	114
\$5,000 - \$7,499	11,334	10,978	11,432	11,575	9,446	0
	918	1,404	1,146	2,114	1,814	0
\$7,500 - \$9,999	12,223	10,617	13,223	13,422	11,562	11,499
	1,005	1,856	1,645	1,985	1,416	705
\$10,000 - \$14,999	12,821	11,808	9,622	13,550	14,164	20,315
	1,477	1,908	1,499	2,056	3,796	12,822
\$15,000 - \$19,999	11,459	7,514	12,355	11,806	11,898	12,488
	1,069	1,491	3,753	1,521	1,760	1,831
\$20,000 - \$24,999	11,081	20,148	19,707	9,209	12,127	15,185
	955	9,344	7,306	1,331	1,398	3,108
\$25,000 - \$29,999	10,453	12,833	0	13,825	10,145	6,166
	1,341	4,693	0	3,007	1,701	648
\$30,000 or more	12,041	14,661	11,076	11,964	12,149	14,964
	904	4,007	3,934	1,228	1,638	4,717



**Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$11,848	\$12,312	\$11,953	\$12,200	\$12,242	\$13,944
	412	835	845	739	925	2,441
<b>Health Status</b>						
Excellent	10,781	12,791	8,321	10,188	15,724	6,826
	1,572	2,891	1,621	1,620	6,945	3,054
Very good	9,735	16,096	8,037	10,222	8,699	16,505
	656	3,710	1,653	1,088	866	5,023
Good	10,367	9,625	9,495	11,352	10,846	10,508
	492	1,644	937	920	766	2,070
Fair	11,856	9,911	11,210	12,874	11,491	18,101
	705	1,143	1,131	1,290	1,082	6,554
Poor	16,242	16,687	16,360	16,110	18,509	11,262
	1,550	3,088	2,133	3,553	4,004	4,664
<b>Functional Limitation</b>						
None	10,184	11,279	8,883	10,893	11,053	11,607
	638	1,730	754	883	1,750	2,745
IADL only <sup>4</sup>	12,980	12,551	11,525	13,437	13,759	22,078
	795	2,396	1,144	1,562	1,261	8,401
One to two ADLs <sup>5</sup>	11,746	10,272	11,626	14,119	9,859	11,594
	980	1,512	2,449	2,392	958	1,708
Three to five ADLs	14,013	15,708	16,581	11,525	15,114	7,972
	1,105	2,770	2,597	1,314	2,735	2,325

**Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$11,848 <i>412</i>	\$12,312 <i>835</i>	\$11,953 <i>845</i>	\$12,200 <i>739</i>	\$12,242 <i>925</i>	\$13,944 <i>2,441</i>
<b>Metropolitan Area Resident</b>						
Yes	12,398 <i>523</i>	13,223 <i>1,136</i>	12,404 <i>1,134</i>	12,700 <i>970</i>	13,521 <i>1,184</i>	14,067 <i>2,868</i>
No	10,315 <i>662</i>	10,107 <i>765</i>	10,860 <i>992</i>	11,263 <i>1,151</i>	8,027 <i>696</i>	13,282 <i>3,505</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but their expenditures are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$1,047	\$996	\$1,386	\$893	\$1,077	\$865
	35	131	124	51	59	109
<b>Medicare Status<sup>3</sup></b>						
<b>Aged</b>						
65 - 74 years	985	1,084	1,180	835	1,056	903
	50	277	192	67	93	158
75 - 84 years	993	897	1,017	978	1,041	777
	58	157	202	91	103	125
85 years and older	705	581	539	727	711	753
	39	104	96	66	72	295
<b>Disabled</b>						
Under 45 years	1,679	1,155	1,707	978	1,923	995
	241	327	295	516	643	0
45 - 64 years	1,657	980	2,426	1,523	1,566	1,245
	186	183	434	528	325	368
<b>Gender</b>						
Male	1,259	1,178	1,778	1,043	1,304	1,130
	59	219	269	89	96	226
Female	889	745	1,167	800	891	677
	38	89	115	62	79	86
<b>Living Arrangement</b>						
Alone	918	1,193	1,102	758	906	554
	55	401	105	57	119	84
With spouse	1,034	952	1,437	932	1,089	1,039
	40	120	287	60	78	161
With children	1,188	932	1,256	948	1,387	843
	130	191	293	181	337	195
With others	1,531	766	2,117	1,284	1,601	529
	219	98	383	599	499	240

**Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$1,047	\$996	\$1,386	\$893	\$1,077	\$865
	35	131	124	51	59	109
<b>Race/Ethnicity</b>						
White non-Hispanic	962	986	1,295	864	970	888
	35	183	156	50	53	116
Black non-Hispanic	1,514	1,095	1,449	1,520	2,214	722
	173	224	200	987	549	361
Hispanic	1,363	1,017	1,315	848	2,057	246
	185	216	262	303	743	172
Other	1,559	414	2,333	1,861	1,131	371
	427	213	1,105	892	348	62
<b>Income</b>						
Less than \$2,500	844	1,596	974	438	731	189
	129	602	209	104	201	78
\$2,500 - \$4,999	850	407	665	584	2,696	2,254
	169	190	129	141	1,148	0
\$5,000 - \$7,499	1,096	822	1,278	793	549	1,311
	93	157	146	101	119	843
\$7,500 - \$9,999	1,028	876	1,525	815	555	571
	99	127	265	120	67	99
\$10,000 - \$14,999	1,178	1,261	1,797	1,024	1,292	680
	120	481	565	146	214	213
\$15,000 - \$19,999	1,030	811	3,015	782	1,137	975
	97	214	1,663	86	189	322
\$20,000 - \$24,999	885	805	1,314	1,015	729	813
	70	290	519	214	62	175
\$25,000 - \$29,999	987	723	764	826	1,217	513
	106	194	442	114	222	84
\$30,000 or more	1,077	1,243	1,458	932	1,200	1,047
	73	288	526	98	130	195

**Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$1,047	\$996	\$1,386	\$893	\$1,077	\$865
	35	131	124	51	59	109
<b>Health Status</b>						
Excellent	709	582	772	704	670	525
	61	111	165	88	121	184
Very good	710	704	842	635	721	661
	30	141	207	47	54	120
Good	997	1,488	1,050	856	953	936
	62	490	209	63	84	221
Fair	1,283	783	1,545	1,142	1,456	1,235
	84	70	229	146	154	292
Poor	1,923	1,192	2,105	1,877	2,562	974
	181	207	272	559	508	230
<b>Functional Limitation</b>						
None	849	841	1,239	682	879	736
	38	125	211	40	63	118
IADL only <sup>4</sup>	1,284	796	1,637	1,182	1,372	1,071
	95	94	207	180	204	236
One to two ADLs <sup>5</sup>	1,176	1,100	1,211	1,191	1,235	1,110
	91	192	248	146	157	319
Three to five ADLs	1,415	1,866	1,454	1,221	1,508	454
	187	945	408	312	260	131

**Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$1,047	\$996	\$1,386	\$893	\$1,077	\$865
	<i>35</i>	<i>131</i>	<i>124</i>	<i>51</i>	<i>59</i>	<i>109</i>
<b>Metropolitan Area Resident</b>						
Yes	1,115	1,099	1,611	864	1,141	972
	<i>46</i>	<i>191</i>	<i>168</i>	<i>68</i>	<i>72</i>	<i>147</i>
No	880	804	938	941	865	589
	<i>43</i>	<i>113</i>	<i>116</i>	<i>68</i>	<i>95</i>	<i>103</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but their expenditures are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$2,144	\$1,655	\$2,300	\$2,054	\$2,005	\$2,169
	44	149	102	85	88	160
<b>Medicare Status<sup>3</sup></b>						
<b>Aged</b>						
65 - 74 years	1,917	1,610	2,160	1,738	1,815	2,007
	54	253	159	82	115	184
75 - 84 years	2,364	1,564	2,262	2,351	2,171	2,384
	76	270	196	145	130	315
85 years and older	2,465	1,609	2,604	2,534	2,039	2,748
	153	214	271	393	139	532
<b>Disabled</b>						
Under 45 years	2,352	2,199	2,360	1,217	2,565	1,870
	259	537	271	292	1,067	0
45 - 64 years	2,366	1,667	2,408	2,335	2,855	1,949
	175	211	241	414	494	634
<b>Gender</b>						
Male	2,184	1,529	2,185	2,292	2,087	1,803
	52	160	137	121	107	166
Female	2,113	1,825	2,366	1,904	1,932	2,474
	60	278	129	109	120	268
<b>Living Arrangement</b>						
Alone	2,178	1,611	2,341	1,988	2,071	2,637
	78	236	145	151	157	380
With spouse	2,026	1,577	2,089	2,060	1,856	1,876
	48	214	144	94	82	179
With children	2,506	2,106	2,389	2,036	2,804	2,533
	164	297	197	190	674	528
With others	2,443	1,668	2,377	2,462	2,912	2,816
	174	424	254	363	732	792

**Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$2,144	\$1,655	\$2,300	\$2,054	\$2,005	\$2,169
	44	149	102	85	88	160
<b>Race/Ethnicity</b>						
White non-Hispanic	2,105	1,529	2,349	2,062	1,929	2,205
	51	137	134	89	90	171
Black non-Hispanic	2,344	1,911	2,362	1,576	2,728	1,757
	189	528	242	254	494	487
Hispanic	2,440	2,320	2,180	2,492	2,649	1,715
	193	652	215	453	539	913
Other	2,144	956	2,043	2,038	2,545	1,623
	310	323	352	586	1,477	421
<b>Income</b>						
Less than \$2,500	1,944	1,995	1,586	2,068	1,420	2,001
	184	740	290	415	320	963
\$2,500 - \$4,999	1,929	1,613	1,996	1,449	2,458	1,999
	297	1,422	317	223	725	977
\$5,000 - \$7,499	2,033	1,762	2,150	1,638	1,898	869
	113	404	134	196	487	311
\$7,500 - \$9,999	2,391	1,855	2,794	2,000	2,440	2,789
	149	232	249	182	747	821
\$10,000 - \$14,999	2,300	1,517	2,129	2,444	2,246	1,787
	121	172	319	257	221	322
\$15,000 - \$19,999	2,144	1,758	2,655	1,889	2,080	2,600
	111	602	678	162	217	426
\$20,000 - \$24,999	1,980	1,315	2,194	1,743	1,839	2,737
	108	313	798	172	174	826
\$25,000 - \$29,999	2,064	1,572	2,024	2,405	1,751	1,593
	136	484	432	346	206	293
\$30,000 or more	2,108	1,481	4,138	2,086	1,965	2,064
	78	244	1,039	142	122	198



**Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$2,144	\$1,655	\$2,300	\$2,054	\$2,005	\$2,169
	44	149	102	85	88	160
<b>Health Status</b>						
Excellent	1,503	936	1,400	1,359	1,184	1,811
	62	157	199	129	111	432
Very good	1,583	1,143	1,409	1,621	1,284	1,494
	66	206	207	174	71	164
Good	2,080	1,537	1,817	2,020	2,026	1,994
	60	252	121	100	134	231
Fair	2,713	1,463	2,448	2,826	3,083	3,893
	130	123	171	208	336	612
Poor	3,932	3,277	3,767	4,052	4,704	3,362
	199	663	285	454	607	642
<b>Functional Limitation</b>						
None	1,662	1,277	1,552	1,575	1,446	1,594
	45	176	116	89	70	144
IADL only <sup>4</sup>	2,418	1,447	2,268	2,552	2,419	2,960
	99	169	159	187	210	630
One to two ADLs <sup>5</sup>	2,743	1,781	2,554	2,851	2,969	3,481
	142	335	227	216	384	448
Three to five ADLs	3,955	3,596	4,060	3,475	4,709	3,593
	199	854	373	285	616	941

**Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$2,144	\$1,655	\$2,300	\$2,054	\$2,005	\$2,169
	<i>44</i>	<i>149</i>	<i>102</i>	<i>85</i>	<i>88</i>	<i>160</i>
<b>Metropolitan Area Resident</b>						
Yes	2,350	1,895	2,546	2,234	2,163	2,431
	<i>53</i>	<i>207</i>	<i>136</i>	<i>113</i>	<i>107</i>	<i>205</i>
No	1,566	1,179	1,756	1,722	1,425	1,383
	<i>70</i>	<i>119</i>	<i>137</i>	<i>116</i>	<i>105</i>	<i>157</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but their expenditures are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$694	\$542	\$787	\$612	\$780	\$740
	13	28	35	15	27	43
<b>Medicare Status<sup>3</sup></b>						
<b>Aged</b>						
65 - 74 years	644	470	762	580	705	707
	17	39	64	23	28	60
75 - 84 years	680	493	794	622	748	720
	16	47	53	24	32	66
85 years and older	642	565	689	613	663	672
	21	68	60	27	49	89
<b>Disabled</b>						
Under 45 years	774	568	798	698	977	2,384
	41	77	58	163	143	0
45 - 64 years	1,104	743	877	1,093	1,643	1,894
	74	67	71	202	227	782
<b>Gender</b>						
Male	658	530	695	593	748	653
	16	31	51	22	32	59
Female	722	557	838	624	807	812
	17	41	42	21	36	62
<b>Living Arrangement</b>						
Alone	685	562	845	579	754	664
	17	63	45	20	42	70
With spouse	679	507	746	604	761	761
	19	33	72	24	30	59
With children	763	624	712	748	920	894
	41	81	56	56	152	202
With others	758	560	788	710	1,053	776
	49	71	74	61	229	137

**Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$694	\$542	\$787	\$612	\$780	\$740
	13	28	35	15	27	43
<b>Race/Ethnicity</b>						
White non-Hispanic	705	576	874	614	787	752
	13	37	49	16	29	45
Black non-Hispanic	634	453	710	541	687	586
	29	50	42	71	82	110
Hispanic	710	515	721	652	858	573
	83	60	88	135	236	138
Other	519	382	537	610	574	590
	52	91	102	100	161	273
<b>Income</b>						
Less than \$2,500	676	875	435	678	766	696
	71	291	65	92	153	295
\$2,500 - \$4,999	640	320	745	719	608	933
	57	49	90	132	140	644
\$5,000 - \$7,499	684	435	766	463	827	1,156
	37	51	40	41	292	331
\$7,500 - \$9,999	693	561	890	638	615	967
	32	53	75	41	42	234
\$10,000 - \$14,999	671	527	722	624	789	708
	23	36	71	34	55	88
\$15,000 - \$19,999	740	503	977	670	863	759
	36	73	271	51	80	101
\$20,000 - \$24,999	730	627	836	565	889	646
	32	106	222	39	63	103
\$25,000 - \$29,999	675	601	587	583	696	578
	45	119	198	48	61	110
\$30,000 or more	687	598	1,295	615	737	780
	23	96	516	35	35	82

**Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$694	\$542	\$787	\$612	\$780	\$740
	13	28	35	15	27	43
<b>Health Status</b>						
Excellent	437	288	533	393	449	498
	18	43	123	24	31	93
Very good	555	340	654	469	626	531
	16	29	77	21	32	49
Good	686	524	667	630	777	847
	19	50	44	26	44	92
Fair	901	596	835	841	1,174	1,039
	29	50	50	40	83	86
Poor	1,058	878	1,047	1,029	1,261	1,383
	43	120	85	90	109	237
<b>Functional Limitation</b>						
None	550	400	658	478	599	618
	12	31	52	16	20	56
IADL only <sup>4</sup>	782	532	781	705	948	869
	22	47	49	30	57	104
One to two ADLs <sup>5</sup>	893	602	898	845	1,048	1,037
	27	66	61	50	69	101
Three to five ADLs	1,126	1,018	978	1,010	1,558	1,060
	70	130	81	82	245	244

**Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1995<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$694	\$542	\$787	\$612	\$780	\$740
	<i>13</i>	<i>28</i>	<i>35</i>	<i>15</i>	<i>27</i>	<i>43</i>
<b>Metropolitan Area Resident</b>						
Yes	698	523	802	615	777	749
	<i>16</i>	<i>30</i>	<i>43</i>	<i>19</i>	<i>32</i>	<i>54</i>
No	687	590	758	606	795	713
	<i>18</i>	<i>57</i>	<i>58</i>	<i>25</i>	<i>42</i>	<i>70</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but their expenditures are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$11,848	\$10,373	\$125	\$831	\$292	\$227
	412	396	11	63	27	41
<b>Medicare Status<sup>2</sup></b>						
<b>Aged</b>						
65 - 74 years	12,327	10,859	90	895	270	212
	689	694	18	105	36	68
75 - 84 years	11,849	10,458	96	736	280	280
	791	729	20	69	63	76
85 years and older	9,873	8,977	116	525	210	45
	515	516	17	31	34	22
<b>Disabled</b>						
Under 45 years	11,512	8,989	507	1,221	446	348
	1,298	1,252	49	530	91	135
45 - 64 years	12,412	10,306	225	1,122	480	280
	1,098	1,100	30	229	73	84
<b>Gender</b>						
Male	12,308	10,474	80	899	418	437
	648	630	9	100	55	90
Female	11,453	10,285	163	773	184	47
	547	524	21	74	17	15
<b>Marital Status</b>						
Married	11,133	9,648	53	1,022	230	181
	419	390	7	101	22	56
Widowed	12,404	11,203	168	600	252	180
	769	741	29	61	36	64
Divorced/separated	13,845	11,456	228	877	699	585
	2,019	2,069	31	263	214	224
Never married	10,936	9,457	288	550	356	285
	1,267	1,247	33	137	65	119

**Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$11,848	\$10,373	\$125	\$831	\$292	\$227
	412	396	11	63	27	41
<b>Race/Ethnicity</b>						
White non-Hispanic	11,712	10,249	76	878	291	218
	392	370	10	65	33	46
Black non-Hispanic	14,624	13,193	366	565	346	154
	2,121	2,099	73	163	57	37
Hispanic	9,632	7,980	292	798	260	302
	948	913	30	329	57	128
Other	10,534	8,904	294	378	162	796
	1,364	1,357	87	180	67	815
<b>Income</b>						
Less than \$2,500	10,635	9,052	140	523	554	367
	2,157	2,188	50	272	240	238
\$2,500 - \$4,999	14,252	12,891	570	328	366	97
	4,101	3,832	340	60	167	76
\$5,000 - \$7,499	11,334	10,049	449	310	208	318
	918	781	46	61	33	143
\$7,500 - \$9,999	12,223	10,797	187	669	351	218
	1,005	968	24	154	53	70
\$10,000 - \$14,999	12,821	11,409	53	727	342	289
	1,477	1,480	12	77	58	62
\$15,000 - \$19,999	11,459	9,916	24	1,088	173	260
	1,069	1,071	8	193	36	160
\$20,000 - \$24,999	11,081	9,686	17	962	324	92
	955	874	10	171	88	49
\$25,000 - \$29,999	10,453	9,367	0	719	311	55
	1,341	1,336	0	114	79	30
\$30,000 or more	12,041	10,181	7	1,366	278	208
	904	862	3	214	99	132



**Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				Other Source
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	
<b>Expenditures per User</b>	\$11,848	\$10,373	\$125	\$831	\$292	\$227
	412	396	11	63	27	41
<b>Health Status</b>						
Excellent	10,781	9,502	69	864	236	111
	1,572	1,557	17	260	74	68
Very good	9,735	8,629	53	704	175	175
	656	665	9	81	34	101
Good	10,367	8,799	89	811	331	337
	492	461	11	108	76	97
Fair	11,856	10,263	137	916	298	241
	705	672	13	109	38	83
Poor	16,242	14,747	249	769	348	129
	1,550	1,520	56	134	39	38
<b>Functional Limitation</b>						
None	10,184	8,745	74	824	322	218
	638	615	9	91	57	66
IADL only <sup>3</sup>	12,980	11,348	135	919	281	297
	795	762	15	132	48	93
One to two ADLs <sup>4</sup>	11,746	10,497	166	636	237	210
	980	942	44	66	41	109
Three to five ADLs	14,013	12,496	177	880	303	157
	1,105	1,092	42	160	48	49

**Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$11,848	\$10,373	\$125	\$831	\$292	\$227
	<i>412</i>	<i>396</i>	<i>11</i>	<i>63</i>	<i>27</i>	<i>41</i>
<b>Metropolitan Area Resident</b>						
Yes	12,398	10,875	124	830	296	273
	<i>523</i>	<i>498</i>	<i>14</i>	<i>72</i>	<i>34</i>	<i>54</i>
No	10,315	8,980	125	830	282	98
	<i>662</i>	<i>624</i>	<i>11</i>	<i>131</i>	<i>38</i>	<i>34</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

**Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$1,047	\$630	\$31	\$244	\$99	\$43
	35	24	3	12	6	10
<b>Medicare Status<sup>2</sup></b>						
<b>Aged</b>						
65 - 74 years	985	572	16	254	93	49
	50	34	3	16	8	18
75 - 84 years	993	624	21	243	78	27
	58	42	4	15	7	9
85 years and older	705	440	17	169	67	13
	39	27	3	12	9	6
<b>Disabled</b>						
Under 45 years	1,679	1,080	178	149	237	35
	241	200	26	34	60	8
45 - 64 years	1,657	977	103	301	180	96
	186	136	17	75	23	35
<b>Gender</b>						
Male	1,259	712	30	305	128	84
	59	37	4	23	12	22
Female	889	569	32	199	77	12
	38	29	3	9	8	5
<b>Marital Status</b>						
Married	1,029	602	14	288	88	37
	40	30	3	15	7	9
Widowed	888	574	31	185	81	17
	49	37	5	12	8	3
Divorced/separated	1,481	812	84	238	190	157
	182	104	13	67	26	93
Never married	1,382	900	108	163	152	59
	204	141	15	44	30	22

**Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$1,047	\$630	\$31	\$244	\$99	\$43
	35	24	3	12	6	10
<b>Race/Ethnicity</b>						
White non-Hispanic	962	550	16	260	94	42
	35	20	2	13	8	11
Black non-Hispanic	1,514	1,093	94	172	115	41
	173	133	13	31	17	14
Hispanic	1,363	875	115	148	163	63
	185	150	23	32	55	37
Other	1,559	1,124	127	225	64	18
	427	367	45	56	20	9
<b>Income</b>						
Less than \$2,500	844	554	60	98	115	18
	129	86	16	21	41	11
\$2,500 - \$4,999	850	547	71	111	83	38
	169	122	15	44	23	24
\$5,000 - \$7,499	1,096	775	130	87	85	20
	93	76	14	14	13	6
\$7,500 - \$9,999	1,028	652	57	134	142	41
	99	75	11	14	32	13
\$10,000 - \$14,999	1,178	703	23	246	110	96
	120	77	7	22	20	49
\$15,000 - \$19,999	1,030	593	8	300	84	45
	97	58	4	50	10	18
\$20,000 - \$24,999	885	517	1	248	97	22
	70	48	1	23	15	6
\$25,000 - \$29,999	987	556	0	320	79	32
	106	61	0	63	15	17
\$30,000 or more	1,077	600	0	355	90	32
	73	50	0	28	13	15

**Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$1,047	\$630	\$31	\$244	\$99	\$43
	35	24	3	12	6	10
<b>Health Status</b>						
Excellent	709	406	10	216	56	22
	61	35	3	33	6	8
Very good	710	424	8	184	81	14
	30	19	1	12	12	3
Good	997	569	23	244	88	73
	62	35	4	20	13	30
Fair	1,283	774	56	278	125	50
	84	55	7	33	16	11
Poor	1,923	1,274	85	349	177	38
	181	130	13	44	29	22
<b>Functional Limitation</b>						
None	849	502	18	229	72	29
	38	27	2	15	6	5
IADL only <sup>3</sup>	1,284	817	51	254	117	46
	95	71	6	20	17	15
One to two ADLs <sup>4</sup>	1,176	709	45	251	130	42
	91	66	9	22	18	18
Three to five ADLs	1,415	785	37	299	167	127
	187	93	9	68	39	96

**Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$1,047	\$630	\$31	\$244	\$99	\$43
	<i>35</i>	<i>24</i>	<i>3</i>	<i>12</i>	<i>6</i>	<i>10</i>
<b>Metropolitan Area Resident</b>						
Yes	1,115	667	34	263	104	48
	<i>46</i>	<i>30</i>	<i>3</i>	<i>16</i>	<i>8</i>	<i>13</i>
No	880	540	24	198	86	32
	<i>43</i>	<i>36</i>	<i>3</i>	<i>10</i>	<i>5</i>	<i>12</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

**Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$2,144	\$1,408	\$44	\$298	\$370	\$24
	44	31	3	11	13	3
<b>Medicare Status<sup>2</sup></b>						
<b>Aged</b>						
65 - 74 years	1,917	1,277	20	281	320	19
	54	42	2	12	19	3
75 - 84 years	2,364	1,617	31	318	384	15
	76	47	4	16	28	2
85 years and older	2,465	1,694	75	296	391	9
	153	120	20	28	21	3
<b>Disabled</b>						
Under 45 years	2,352	1,201	275	241	543	92
	259	138	48	101	98	39
45 - 64 years	2,366	1,263	114	370	543	76
	175	90	15	76	58	20
<b>Gender</b>						
Male	2,184	1,447	34	308	363	33
	52	36	4	13	17	4
Female	2,113	1,378	52	291	375	17
	60	44	5	15	18	3
<b>Marital Status</b>						
Married	2,033	1,320	14	325	352	23
	47	30	2	15	18	3
Widowed	2,304	1,570	59	288	371	15
	90	65	7	17	27	3
Divorced/separated	2,268	1,477	111	214	410	57
	143	105	15	27	45	16
Never married	2,160	1,280	152	232	464	33
	195	115	23	40	84	8

**Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$2,144	\$1,408	\$44	\$298	\$370	\$24
	44	31	3	11	13	3
<b>Race/Ethnicity</b>						
White non-Hispanic	2,105	1,372	27	321	362	22
	51	35	3	13	14	3
Black non-Hispanic	2,344	1,556	145	164	452	27
	189	117	22	20	94	7
Hispanic	2,440	1,724	109	192	397	18
	193	105	10	38	89	3
Other	2,144	1,408	125	282	244	84
	310	174	42	157	44	63
<b>Income</b>						
Less than \$2,500	1,944	1,288	62	159	405	29
	184	129	20	25	83	11
\$2,500 - \$4,999	1,929	1,350	172	135	246	26
	297	242	57	24	52	15
\$5,000 - \$7,499	2,033	1,415	194	113	295	17
	113	75	14	15	37	4
\$7,500 - \$9,999	2,391	1,612	89	228	424	39
	149	112	13	27	37	12
\$10,000 - \$14,999	2,300	1,532	15	342	373	38
	121	90	2	31	25	10
\$15,000 - \$19,999	2,144	1,399	12	308	398	27
	111	68	7	20	65	6
\$20,000 - \$24,999	1,980	1,280	1	305	382	13
	108	64	0	23	55	4
\$25,000 - \$29,999	2,064	1,361	1	368	314	20
	136	103	1	41	27	8
\$30,000 or more	2,108	1,313	5	396	380	14
	78	51	4	28	22	3



**Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				Other Source
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	
<b>Expenditures per User</b>	\$2,144	\$1,408	\$44	\$298	\$370	\$24
	44	31	3	11	13	3
<b>Health Status</b>						
Excellent	1,503	1,002	11	209	269	13
	62	46	2	19	20	4
Very good	1,583	1,057	16	239	257	14
	66	51	2	16	13	3
Good	2,080	1,424	31	287	320	17
	60	43	3	15	17	4
Fair	2,713	1,775	74	372	456	35
	130	90	7	26	38	5
Poor	3,932	2,331	159	510	862	70
	199	119	25	72	110	20
<b>Functional Limitation</b>						
None	1,662	1,124	17	235	270	15
	45	33	2	11	12	3
IADL only <sup>3</sup>	2,418	1,617	57	343	367	34
	99	70	6	25	29	7
One to two ADLs <sup>4</sup>	2,743	1,779	76	420	435	34
	142	101	11	46	30	8
Three to five ADLs	3,955	2,302	157	435	1,021	40
	199	121	28	50	98	13

**Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$2,144	\$1,408	\$44	\$298	\$370	\$24
	<i>44</i>	<i>31</i>	<i>3</i>	<i>11</i>	<i>13</i>	<i>3</i>
<b>Metropolitan Area Resident</b>						
Yes	2,350	1,569	44	321	391	25
	<i>53</i>	<i>38</i>	<i>3</i>	<i>14</i>	<i>16</i>	<i>3</i>
No	1,566	958	44	236	309	20
	<i>70</i>	<i>48</i>	<i>8</i>	<i>13</i>	<i>19</i>	<i>4</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

**Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents with at Least One Dental Service in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$456	\$3	\$3	\$70	\$373	\$7
	17	0	1	6	15	1
<b>Medicare Status<sup>2</sup></b>						
<b>Aged</b>						
65 - 74 years	460	2	1	80	371	5
	22	0	0	9	19	1
75 - 84 years	440	4	2	53	376	5
	23	0	1	7	22	3
85 years and older	403	3	6	30	362	2
	54	1	4	8	51	1
<b>Disabled</b>						
Under 45 years	349	1	30	57	218	42
	40	1	7	18	23	25
45 - 64 years	610	1	10	99	486	14
	178	0	4	27	153	6
<b>Gender</b>						
Male	442	3	2	77	350	10
	25	0	1	11	24	2
Female	467	2	4	64	391	4
	24	0	1	6	21	2
<b>Marital Status</b>						
Married	451	3	1	81	359	8
	19	0	0	8	17	2
Widowed	407	3	5	43	353	3
	28	0	1	6	25	1
Divorced/separated	655	2	10	91	541	11
	122	0	3	23	107	5
Never married	474	1	12	53	402	5
	113	1	3	18	100	2

**Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents with at Least One Dental Service in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$456	\$3	\$3	\$70	\$373	\$7
	17	0	1	6	15	1
<b>Race/Ethnicity</b>						
White non-Hispanic	462	3	2	72	379	6
	18	0	0	6	16	1
Black non-Hispanic	369	4	13	79	262	11
	56	1	5	26	38	5
Hispanic	403	4	15	30	350	5
	48	1	6	8	47	3
Other	523	4	12	53	439	14
	117	1	5	22	107	18
<b>Income</b>						
Less than \$2,500	242	5	7	27	201	1
	34	3	5	11	32	1
\$2,500 - \$4,999	424	4	12	25	380	4
	93	2	6	14	95	11
\$5,000 - \$7,499	564	2	30	23	501	8
	158	1	7	17	147	6
\$7,500 - \$9,999	345	3	12	19	306	6
	39	0	4	5	38	2
\$10,000 - \$14,999	389	3	3	44	334	6
	36	0	2	10	33	2
\$15,000 - \$19,999	411	3	0	56	348	4
	38	0	0	10	36	3
\$20,000 - \$24,999	442	3	0	82	343	13
	51	1	0	13	45	6
\$25,000 - \$29,999	371	3	0	69	296	3
	41	1	0	13	37	1
\$30,000 or more	537	2	0	101	427	7
	28	0	0	14	22	2

**Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents with at Least One Dental Service in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$456	\$3	\$3	\$70	\$373	\$7
	17	0	1	6	15	1
<b>Health Status</b>						
Excellent	478	3	2	74	394	5
	42	1	1	11	38	1
Very good	440	2	2	76	352	7
	29	0	1	14	27	3
Good	455	3	2	67	378	6
	27	0	1	9	24	1
Fair	463	3	6	70	379	6
	74	1	1	13	65	2
Poor	463	1	15	36	391	20
	70	0	6	13	62	16
<b>Functional Limitation</b>						
None	459	3	2	75	372	7
	19	0	0	8	18	2
IADL only <sup>3</sup>	390	2	6	55	320	7
	30	0	2	9	25	2
One to two ADLs <sup>4</sup>	412	3	5	61	340	4
	41	1	1	14	33	3
Three to five ADLs	805	2	10	81	706	7
	212	1	4	27	187	4

**Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents with at Least One Dental Service in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$456	\$3	\$3	\$70	\$373	\$7
	<i>17</i>	<i>0</i>	<i>1</i>	<i>6</i>	<i>15</i>	<i>1</i>
<b>Metropolitan Area Resident</b>						
Yes	495	3	3	78	404	7
	<i>20</i>	<i>0</i>	<i>0</i>	<i>7</i>	<i>18</i>	<i>1</i>
No	331	0	5	45	274	7
	<i>30</i>	<i>0</i>	<i>2</i>	<i>8</i>	<i>26</i>	<i>4</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

**Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (1 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$694	\$29	\$74	\$202	\$338	\$51
	13	1	5	8	6	3
<b>Medicare Status<sup>2</sup></b>						
<b>Aged</b>						
65 - 74 years	644	27	46	218	312	42
	17	1	6	10	8	5
75 - 84 years	680	39	58	174	360	50
	16	2	6	9	10	5
85 years and older	642	30	82	124	366	40
	21	3	13	11	13	7
<b>Disabled</b>						
Under 45 years	774	10	360	118	225	60
	41	3	32	21	14	14
45 - 64 years	1,104	13	185	332	454	119
	74	2	21	57	32	13
<b>Gender</b>						
Male	658	32	53	198	315	60
	16	2	5	11	8	5
Female	722	27	90	205	356	44
	17	1	7	10	8	4
<b>Marital Status</b>						
Married	681	30	26	240	341	45
	19	2	4	12	9	4
Widowed	709	32	98	160	365	54
	17	2	11	9	10	6
Divorced/separated	713	23	184	160	278	68
	46	3	19	35	17	11
Never married	711	15	234	141	261	61
	54	3	24	40	17	12

**Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (2 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$694	\$29	\$74	\$202	\$338	\$51
	13	1	5	8	6	3
<b>Race/Ethnicity</b>						
White non-Hispanic	705	28	51	222	356	49
	13	1	4	9	6	4
Black non-Hispanic	634	26	183	116	253	56
	29	3	21	17	17	10
Hispanic	710	50	222	105	276	56
	83	6	32	40	40	11
Other	519	38	114	82	211	74
	52	8	24	22	23	30
<b>Income</b>						
Less than \$2,500	676	30	88	93	396	69
	71	7	16	21	59	23
\$2,500 - \$4,999	640	18	203	61	293	64
	57	6	38	20	33	18
\$5,000 - \$7,499	684	17	335	55	228	49
	37	3	21	22	12	8
\$7,500 - \$9,999	693	36	164	76	356	61
	32	4	21	10	16	8
\$10,000 - \$14,999	671	32	27	163	375	75
	23	2	4	13	15	11
\$15,000 - \$19,999	740	30	10	250	386	63
	36	3	5	26	20	10
\$20,000 - \$24,999	730	32	4	317	338	39
	32	4	2	24	15	7
\$25,000 - \$29,999	675	31	2	279	339	23
	45	4	1	32	29	5
\$30,000 or more	687	28	6	288	333	32
	23	2	4	17	12	4



**Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (3 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$694	\$29	\$74	\$202	\$338	\$51
	13	1	5	8	6	3
<b>Health Status</b>						
Excellent	437	38	20	138	216	24
	18	4	5	11	10	4
Very good	555	30	31	183	280	30
	16	2	5	12	10	5
Good	686	33	57	212	335	49
	19	2	6	12	11	6
Fair	901	17	139	237	427	80
	29	2	12	23	14	10
Poor	1,058	22	188	248	508	91
	43	4	27	24	29	10
<b>Functional Limitation</b>						
None	550	32	39	174	270	35
	12	2	4	7	7	3
IADL only <sup>3</sup>	782	28	102	216	381	55
	22	2	10	14	12	8
One to two ADLs <sup>4</sup>	893	21	129	238	426	79
	27	2	13	22	19	9
Three to five ADLs	1,126	25	151	302	548	99
	70	4	21	59	31	20

**Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1995 (4 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1995<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$694	\$29	\$74	\$202	\$338	\$51
	<i>13</i>	<i>1</i>	<i>5</i>	<i>8</i>	<i>6</i>	<i>3</i>
<b>Metropolitan Area Resident</b>						
Yes	698	38	70	217	316	57
	<i>16</i>	<i>1</i>	<i>6</i>	<i>10</i>	<i>7</i>	<i>4</i>
No	687	4	85	161	404	32
	<i>18</i>	<i>1</i>	<i>11</i>	<i>13</i>	<i>12</i>	<i>4</i>

Source: Medicare Current Beneficiary Survey, CY 1995 Cost and Use Public-Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.